FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

FORM D
SALE OF SECURIT

SEC USE ONLY
Prefix Serial
DATE RECEIVED

OMB Number: 3235-0076

Expires: April 30, 2008

hours per response16.00

Estimated average burden

Name of Offering Check if this an amendment and name has changed, and indicate change.) Offering of Limited Partnership Interests by Maverick Lung Enhanced, L.P. Filing Under (Check box(es) that apply):	Nashington, isc 100	DATERCOLVED
Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Maverick Long Enhanced, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) 300 Crescent Court, 18th Floor, Dallas, Texas 75201 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Fullephone Number (Including Area Code) (214) 880-4040 Tulephone Number (Including Area Code) (if different from Executive Offices) PROCESSED	Enhanced, L.P.	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Maverick Long Enhanced, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (214) 880-4040 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) PROCESSED	Tring didet (circle box(es) that apply).	OE
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Maverick Long Enhanced, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (214) 880-4040 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Private Investment Partnership	1. Enter the information requested about the issuer	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (214) 880-4040 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Private Investment Partnership	Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08047450
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Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Private Investment Partnership	Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) Brief Description of Business Private Investment Partnership	300 Crescent Court, 18th Floor, Dallas, Texas 75201	(214) 880-4040
Brief Description of Business Private Investment Partnership Type of Business Organization corporation Imited partnership, already formed other (please specify): APR 2-1-2008	· · · · · · · · · · · · · · · · · · ·	
Type of Business Organization	Brief Description of Business	PROCESS
Type of Business Organization corporation limited partnership, already formed other (please specify): APR 2.1.2008	Private Investment Partnership	HOUESSED
business trust limited partnership, to be formed	☐ corporation ☐ limited partnership, already formed ☐ other (ple	ase specify): APR 2.1:2008 THOMSON FINANCIAL
Month Year FINANCIAL	,	FINANCIAL
Actual or Estimated Date of Incorporation or Organization 07 /05 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) DE	Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	

GENERAL INSTRUCTIONS

Federal:

Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy of bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

A. BASIC IDENTIFICATION DATA						
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 						
Check Box(cs) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner						
Full Name (Last name first, if individual)						
Maverick Capital Advisors, L.P. Business or Residence Address (Number and Street, City, State, Zip Code)						
300 Crescent Court, 18th Floor, Dallas, Texas 75201						
Check Box(es) that Apply:						
Full Name (Last name first, if individual) Cohasset VC, Ltd.						
Business or Residence Address (Number and Street, City, State, Zip Code) 300 Crescent Court, 18th Floor, Dallas, Texas 75201						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply:						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)						

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B. INFORMATION ABOUT OFFERING												
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							.,,.	Yes	No ⊠			
Answer also in Appendix, Column 2, if filing under OLOE. 2. What is the minimum investment that will be accepted from any individual?									\$ 2,000,000 Subject to waiver by the issuer's general partner			
	Yes No											
4. Enter similarssocideale												
Full Name	(Last name fir	rst, if individu	ual)									
Business o	r Residence A	ddress (Numl	ber and Stree	ı, City. State.	Zip Code							
Name of A	Associated Bro	ker or Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
AL	AK All States	AZ	AR	CA	со	СТ	DE	DC	FL	GA	н	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	Full Name (Lust name first, if individual)											
Business o	or Residence A	ddress (Num	ber and Stree	ı, City, State,	Zip Code							
Name of A	Associated Bro	ker or Dealer	•									
States in V	Vhich Person L	isted Has So	licited or Into	ends to Solicit	Purchasers							
(Check "All States" or check individual States)								☐ All States				
AL	AK	AZ	AR	CA	со	ст	DE	DC	FL	GΛ	HI	ID .
1L	IN	IA	KS	KY	LA	ME	MD	MA	МІ	MN	MS	МО
МТ	NE	NV	NH	NJ	NM	NY	NC	UN	OH	OK	OR	PA
RI SC SD TN TX UT VT VA WA WV WI WY PR												
	: (Last name fi											
Business or Residence Address (Number and Street, City, State, Zip Code												
Name of A	Associated Bro	ker or Dealer				-						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
AL	AK	AZ	AR	CA	со	СТ	DE	DC	FL.	GA	10	ID
IL.	IN	IΛ	KS	KY	LA	ME	MD	MA	MI	MN	MS	мо
мт	NE	NV	НИ	NJ	NM	NY	NC	ND	OH	ок	OR	PA
RI	sc	SD	TN	тх	UT	VT	VA	WA	wv	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price*	Amount Already Sold
	Debt	S	\$
	Equity		\$
	□ Common □ Preferred		·
	Convertible Securities (including warrants)	S	s
	Partnership Interests		\$10,712,776.00
	Other (Specify:)		S
	Total		\$10,712,776,00
	Answer also in Appendix, Column 3, if filing under ULOE.	2	*on-going, no maximum
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$10,712,776.00
	Non-accredited Investors	0	\$N/A
	Total (for filings under Rule 504 only)	N/A	SN/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rufe 505	N/A	SN/A
	Regulation A		SN/A
	Rule 504	N/A	SN/A
	Total		SN/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	,,,,,	•
	Transfer Agent's Fees		SNIA
	Printing and Engraving Costs		SN/A
	Legal Fees.		SN/A
	Accounting Fees	. 🗖	SN/A
	Engineering Fees		SN/A
	Sales Commissions (specify finders' fees separately)		SN/A
	Other Expenses (identify)		\$N/A
	Total.		SN/A

	C. OFFERING P	RICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	··
	Question I and total expens	ten the aggregate offering price given in response to Part C—es furnished in response to Part C—Question 4.a. This ss proceeds to the issuer."		\$ <u>10,712,776,00</u>
i.	used for each of the purposes estimate and check the box to	the adjusted gross proceed to the issuer used or proposed to be shown. If the amount for any purpose is not known, furnish an the left of the estimate. The total of the payments listed must eds to the issuer set forth in response to Part C — Question 4.b.	l	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🔲 SN/A	SN/A
	Purchase of real estate		SN/A	SN/A
	Purchase, rental or leasing and	t installation of machinery and equipment	SN/A	SN/A
	Construction or leasing of plan	nt buildings and facilities	🔲 \$N/A	\$N/A
	Acquisition of other businesse may be used in exchange for t	es (including the value of securities involved in this offering that the assets or securities of another issuer pursuant to a merger)	t 🔲 SN/A	SN/A
	Repayment of indebtedness		SN/A	SN/A
	Working capital		SN/A	SN/A
	Other (specify):		□ SN/A	SN/A
			🗖 \$N/A	
	Column Totals		SN/A	☐ SN/A
	Total Payments Listed (colum	nn totals added)	[] \$N/A
-		D. FEDERAL SIGNATURE		· · · · · · · · · · · · · · · · · · ·
follow	ing signature constitutes un under	to be signed by the undersigned duly authorized person. If taking by the issuer to the U.S. Securities and Exchange Company non-accredited investor pursuant to paragraph (b)(2) of Ru	mission, upon writte	under Rule 505, the in request of its stuff,
Issuer	(Print or Type)	Signature	l i	
Maver	ick Long Enhanced, L.P.	April April	1, 2008	
Name	of Signer (Print or Type)	(Fittle of Signer (Print or Type)		
John T	`. McCafferty	Emited Partner and General Counsel Maverick Capital Advisors, L.P. in its capacity as the General Partner of the Issuer		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)